DHFS

State of Wisconsin

Department of Health and Family Services

Jim Doyle, Governor Kevin R. Hayden, Secretary

June 12, 2007

Dear Local Health Department:

I am writing to provide you with information regarding the Department of Health and Family Services' (Department) BadgerCare Plus initiative and, more specifically, our efforts to align and improve programs and services available to pregnant women in Wisconsin.

Governor Jim Doyle's 2007-09 biennial budget includes a number of health care reform proposals to improve access to affordable health care coverage, reduce costs and improve the quality of health care for all Wisconsin residents. BadgerCare Plus is a key initiative to expanding access and reducing costs. It will merge Family Medicaid, BadgerCare and Healthy Start into one program and expand health coverage to seven new populations, including pregnant women up to 300% of the federal poverty level (approximately \$51,510 per year for a family of three). An additional 1,200 pregnant women are expected to receive health care coverage under this proposed expansion.

BadgerCare Plus will also expand the use of managed care organizations to improve the overall quality of care and generate savings that allow BadgerCare Plus to be implemented without additional costs to taxpayers. As part of the expansion, the Department is developing new performance indicators – related to access, preventive care, and consumer satisfaction – designed to measure, among other outcomes, the quality and availability of services to pregnant women.

In addition to expanding coverage to more pregnant women, BadgerCare Plus also includes a new preventive mental health benefit for all pregnant women. Under the new benefit, all pregnant women will be eligible to receive an in-depth screen for mental health and substance abuse problems, and could receive up to four hours of treatment services during, and for sixty days after, their pregnancy. These new services are designed to identify pregnant women at risk of mental health and substance abuse problems, including depression, during pregnancy and to prevent serious problems through early access to care and treatment.

Another key component of BadgerCare Plus is the development of both individual and system-level incentives that promote and support healthy behaviors and improved health outcomes. These incentives will focus on producing improvements in several areas, including infant mortality. This Healthy Living component will use the flexibility of managed care organizations to provide rewards to recipients who take proactive steps to improve their health and well being.

As many of you know, Wisconsin is a leader in its low infant mortality rate for white infants. However, infants born to African American women in Wisconsin have been three to four times more likely to die before their first birthday than infants born to white women. Further, over the

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past 20 years, virtually no decline has occurred in Wisconsin's African American infant mortality rate. Compared to white infants, mortality disparities also exist among American Indian, Asian, and Hispanic infants, although to a lesser degree.

We need to strengthen our efforts to ensure the best outcomes for *all* mothers and infants in Wisconsin. In response to these disparities, the Department is in the process of implementing a five-year *Framework for Action to Eliminate Racial and Ethnic Disparities in Birth Outcomes* (see http://dhfs.wisconsin.gov/healthybirths/framework.htm).

We are also working to align the goals of BadgerCare Plus and the *Framework for Action* to achieve our common purpose of improved birth outcomes for all pregnant women. Because the timing and quality of care during pregnancy are critical to healthy birth outcomes, it is especially important that the Medicaid prenatal care coordination benefit (PNCC) be well coordinated with BadgerCare Plus.

The Department recently conducted a review of the PNCC benefit. The full report is on the Department's web site at http://dhfs.wisconsin.gov/aboutDHFS/OSF/OSF.HTM. One of the report's recommendations is to improve the link between the medical and psychosocial care women receive during pregnancy.

As more pregnant women enroll in managed care through the BadgerCare Plus expansion, it becomes even more essential that PNCC providers establish or enhance partnerships with HMOs to ensure integrated delivery of medical care and psychosocial services. The Department will be working actively with PNCC providers and HMOs to identify and promote best practices for effective collaboration and partnerships throughout the state.

Local health departments play an important part in the provision of health care services to Wisconsin families and children. We look forward to our continued work together to ensure the effective integration and coordination of PNCC services with managed care and the roll-out of BadgerCare Plus.

With warm regards,

Kevin R. Hayden

Secretary